POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		7331	
O.I.P.E. CLASSIFIER		12	1/20
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	64/49		2-3 00 4-19-00

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim Final	Original	Date									
		11/01	3/02								
1	(1)	✓	✓								
2	2	✓	✓								
3	3	✓	✓								
4	4	✓	✓								
5	5	✓	✓								
6	6	✓	✓								
7	7	✓	=								
8	8	✓	✓								
9	9	✓	=								
10	10	✓	✓								
11	11	✓	✓								
12	12	✓	✓								
13	(13)	✓	✓								
14	14	✓	✓								
15	15	✓	=								
16	16	✓	✓								
17	17	✓	✓								
18	18	✓	=								
19	19	✓	✓								
20	20	✓	=								
21	21	✓	=								
22	22	✓	=								
23	23	✓	=								
24	24	✓	=								
25	(25)	✓	=								
26	26	✓	=								
27	27	✓	=								
28	28	✓	=								
29	29	✓	✓								
30	30	✓	=								
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Claim Final	Original	Date									
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Claim Final	Original	Date									
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If more than 150 claims or 10 actions
staple additional sheet here

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